

AMENDMENTS TO THE CLAIMS

This listing of claims will replace all prior versions, and listings of the claims in the application:

Listing of the Claims

1. (Previously presented) A method for assessing the risk of transplantation rejection in a recipient host comprising the following steps:

- (a) determining the HLA-DR of the recipient and the HLA-DR of a donor and determining if the recipient and donor are DR mismatched;
- (b) assaying for the presence of activated T-lymphocytes in the recipient;
- (c) assaying for the presence of circulating IgG anti-HLA Class II antibodies in the serum of the recipient;

wherein the presence of activated T-lymphocytes in the recipient and the presence of circulating IgG anti-HLA Class II antibodies in a DR mismatched recipient indicates a high risk of transplantation rejection.

2. (Original) The method of claim 1 wherein the recipient host has received a tissue allograft.

3. (Original) The method of claim 1 wherein the recipient host has received a heart transplant.

4. (Original) The method of claim 1 wherein the HLA-DR of the recipient is determined using a microcytotoxicity assay.

5. (Original) The method of claim 1 wherein the HLA-DR of the recipient is determined using a mixed lymphocyte reaction.
6. (Original) The method of claim 1 wherein the HLA-DR of the recipient is determined using a polymerase chain reaction.
7. (Currently amended) The method of claim 1 wherein the presence of ~~antigen~~ activated lymphocytes is measured using a lymphocyte growth assay.
- 8-18. (Canceled)
19. (Previously presented) A method for predicting whether or not a subject who has received a tissue allograft is likely to reject the tissue allograft comprising detecting IgG anti-HLA DR antibodies in serum from the subject by determining reactivity of the serum with panels of separated B- and T- lymphocytes from control individuals representative of the most frequently encountered HLA class I and class II antigens and obtaining a ratio of reactivity with B-versus T-lymphocytes, wherein detection of greater reactivity with B-lymphocytes relative to reactivity with T-lymphocytes indicates that such antibodies are present and indicates that the tissue allograft recipient is likely to reject the tissue allograft.